

Plan 505xs

Description of Benefits & Member Copayments

ADA CODE	BENEFIT	MEMBER COPAYMENT (\$)	ADA CODE	BENEFIT	MEMBER COPAYMENT (\$)																																																																																																																																																																																																																											
DIAGNOSTIC / PREVENTIVE / ADJUNCTIVE																																																																																																																																																																																																																																
D9439	Office Visit / Infectious Disease Control Charge	\$10	D2643	Onlay - porcelain/ceramic - three surfaces	\$360																																																																																																																																																																																																																											
D0120	Periodic Oral Evaluation	No Charge	D2650	Inlay - resin based composite - one surface	336																																																																																																																																																																																																																											
D0140	Limited Oral Evaluation - Problem Focused	No Charge	D2651	Inlay - resin-based composite - two surfaces	336																																																																																																																																																																																																																											
D0150	Comprehensive Oral Evaluation	No Charge	D2652	Inlay - resin-based composite - three surfaces	336																																																																																																																																																																																																																											
D0160	Detailed and Ext. Oral Eval.- Problem Focused ...	No Charge	D2662	Onlay - resin based composite - two surfaces	339																																																																																																																																																																																																																											
D0170	Re-evaluation - limited, Problem Focused (established patient; not postoperative visit) ...	No Charge	D2663	Onlay - resin-based composite - three surfaces	339																																																																																																																																																																																																																											
D0210	Intraoral complete series	22	D2710	Crown - resin - lab	246																																																																																																																																																																																																																											
D0220	Intraoral - periapical - first film	No Charge	D2720/21/22	Crown - resin with metal	392																																																																																																																																																																																																																											
D0230/40	Each additional film	No Charge	D2740	Crown - porcelain/ceramic substrate	372																																																																																																																																																																																																																											
D0250/60	Extraoral - first & each add. film	No Charge	D2750/51/52	Crown - porcelain fused to metal	392																																																																																																																																																																																																																											
D0270/72/74	Bitewing X-ray - 1, 2, 4 film(s)	No Charge	D2780	Crown - 3/4 cast high noble metal	360																																																																																																																																																																																																																											
D0277	Vertical bitewings - seven to eight films	No Charge	D2781	Crown - 3/4 cast predominantly base metal	344																																																																																																																																																																																																																											
D0330	Panoramic	22	D2782	Crown - 3/4 cast noble metal	351																																																																																																																																																																																																																											
D0460	Pulp vitality tests	No Charge	D2783	Crown - 3/4 porcelain/ceramic	371																																																																																																																																																																																																																											
D0470	Diagnostic casts (not in conjunction with ortho)	No Charge	D2790/91/92	Crown - full cast metal	381																																																																																																																																																																																																																											
D1110	Prophylaxis - Teeth Cleaning; Adult (1 per six months, per member)	No Charge	D2910/20	Receiment inlay/crown per unit	31																																																																																																																																																																																																																											
D1120	Prophylaxis - Teeth Cleaning; Child (1 per six months, per member. Exclusive of ADA code D1201)	No Charge	D2930/31	Stainless steel crown - prim or perm tooth	93																																																																																																																																																																																																																											
D1201	Topical Fluoride with Prophylaxis (child)	No Charge	D2932	Prefabricated resin crown	106																																																																																																																																																																																																																											
D1203	Topical Fluoride without Prophylaxis (child)	No Charge	D2950	Core buildup, including any pins	94																																																																																																																																																																																																																											
D1310	Nutritional counseling for control and prevention of dental disease	No Charge	D2952	Cast post & core in addition to crown	142																																																																																																																																																																																																																											
D1320/30	Oral hygiene instructions	No Charge	D2954	Prefab. post & core in addition to crown	116																																																																																																																																																																																																																											
D1351	Sealant - per tooth (up to 14 years of age)	16	D2955	Post removal (not in conj. w/ endo therapy)	37																																																																																																																																																																																																																											
D9110	Palliative (emergency), treatment	35	D2970	Temporary crown (w/ perm. crown)	No Charge																																																																																																																																																																																																																											
D9210/15	Local anesthesia	No Charge	D2980	Crown repair, by report	88																																																																																																																																																																																																																											
D9230	Analgesia, inhalation of nitrous oxide	30	PROSTHETICS (DENTURES)																																																																																																																																																																																																																													
D9310	Consultation (diagnostic service provided by dentist or specialist other than practitioner providing treatment)	34	D5110/20	Complete upper/lower denture	515	D9910	Application of desensitizing medicament	25	D5130/40	Immediate upper/lower denture	549	D9930	Emergency visit during office hours	35	D5211/12	Upper/lower, resin base partial denture (including any conventional clasps, rests & teeth)	476	D9990	Broken Office Appointment per ½ hour	20	D5213/14	Upper/lower, cast base partial denture w/ resin saddles (incl. conventional clasps, rests & teeth)	560	SPACE MAINTAINERS						D1510/20	Space Maintainer Fixed/Removable - Unilateral	112	D5281	Removable unilateral partial - 1 piece cast metal (incl. clasps and teeth)	308	D1515/25	Space Maintainer Fixed/Removable - Bilateral	151	D5410/11	Adjust complete denture, upper/lower	27	D1550	Recementation of space maintainer	27	D5421/22	Upper/lower partial denture adjust	27	RESTORATIVE DENTISTRY (FILLINGS)						AMALGAM RESTORATIONS (Silver)						D2140	Amalgam - one surface, primary or permanent	29	D5510/5610	Repair denture base fee	65	D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415
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D1510/20	Space Maintainer Fixed/Removable - Unilateral	112	D5281	Removable unilateral partial - 1 piece cast metal (incl. clasps and teeth)	308	D1515/25	Space Maintainer Fixed/Removable - Bilateral	151	D5410/11	Adjust complete denture, upper/lower	27	D1550	Recementation of space maintainer	27	D5421/22	Upper/lower partial denture adjust	27	RESTORATIVE DENTISTRY (FILLINGS)						AMALGAM RESTORATIONS (Silver)						D2140	Amalgam - one surface, primary or permanent	29	D5510/5610	Repair denture base fee	65	D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																														
D5281	Removable unilateral partial - 1 piece cast metal (incl. clasps and teeth)	308																																																																																																																																																																																																																														
D1515/25	Space Maintainer Fixed/Removable - Bilateral	151	D5410/11	Adjust complete denture, upper/lower	27	D1550	Recementation of space maintainer	27	D5421/22	Upper/lower partial denture adjust	27	RESTORATIVE DENTISTRY (FILLINGS)						AMALGAM RESTORATIONS (Silver)						D2140	Amalgam - one surface, primary or permanent	29	D5510/5610	Repair denture base fee	65	D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																				
D5410/11	Adjust complete denture, upper/lower	27																																																																																																																																																																																																																														
D1550	Recementation of space maintainer	27	D5421/22	Upper/lower partial denture adjust	27	RESTORATIVE DENTISTRY (FILLINGS)						AMALGAM RESTORATIONS (Silver)						D2140	Amalgam - one surface, primary or permanent	29	D5510/5610	Repair denture base fee	65	D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																										
D5421/22	Upper/lower partial denture adjust	27																																																																																																																																																																																																																														
RESTORATIVE DENTISTRY (FILLINGS)																																																																																																																																																																																																																																
AMALGAM RESTORATIONS (Silver)																																																																																																																																																																																																																																
D2140	Amalgam - one surface, primary or permanent	29	D5510/5610	Repair denture base fee	65	D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																												
D5510/5610	Repair denture base fee	65																																																																																																																																																																																																																														
D2150	Amalgam - two surfaces, primary or permanent	36	D5520/5640/50	Each tooth added	65	D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																		
D5520/5640/50	Each tooth added	65																																																																																																																																																																																																																														
D2160	Amalgam - three surfaces, primary or permanent	45	D5620	Repair cast framework	65	D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																								
D5620	Repair cast framework	65																																																																																																																																																																																																																														
D2161	Amalgam - four/more surfaces prim or permanent	54	D5630/60	Clasp Replaced/Added	86	D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																														
D5630/60	Clasp Replaced/Added	86																																																																																																																																																																																																																														
D2330	RESIN/COMPOSITE RESTORATIONS (Tooth Colored) Resin - one surface, anterior	53	D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204	D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																				
D5670/71	Replace all teeth and acrylic on cast metal framework (maxillary & mandibular)	204																																																																																																																																																																																																																														
D2331	Resin - two surfaces, anterior	63	D5710/11/20/21	Rebase compl/partial upper & lower	196	D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																										
D5710/11/20/21	Rebase compl/partial upper & lower	196																																																																																																																																																																																																																														
D2332	Resin - three surfaces, anterior	75	D5730/31/40/41	Reline compl/partial upper & lower	118	D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																
D5730/31/40/41	Reline compl/partial upper & lower	118																																																																																																																																																																																																																														
D2335	Resin - four or more surfaces, anterior	90	D5750/51	Reline complete upper & lower: lab	166	D2390	Resin-based composite crown, anterior	146	D5760/61	Reline upper/lower partial: lab	166	D2391	Resin - one surface, posterior	56	D5810/11/20/21	Interim complete/partial denture upper& lower	258	D2392	Resin - two surfaces, posterior	66	D5850/51	Tissue conditioning, upper/lower, per unit	58	D2393	Resin - three surfaces, posterior	78	BRIDGE & PONTICS						D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																						
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D2394	Resin - four or more surfaces, posterior	93	D6210/11/12	Pontic - metal	381	D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																																																							
D6210/11/12	Pontic - metal	381																																																																																																																																																																																																																														
D2940	Sedative filling	30	D6240/41/42	Pontic - porcelain fused to metal	392	D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																																																													
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D2951	Pin retention - per tooth, add to restoration	17	D6245	Pontic - porcelain ceramic	372	D3110/20	Pulp cap direct/indirect (excl. final rest)	20	D6250/51/52	Pontic - resin with metal	392	CROWN & BRIDGE*						D2390	Resin-based composite crown, anterior	146	D6519	Inlay/onlay - porcelain/ceramic	362	D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																																																																			
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D2510	Inlay - metallic - one surface	339	D6520	Inlay - metallic, two surfaces	339	D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																																																																																											
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D2520	Inlay - metallic - two surfaces	339	D6530	Inlay - metallic - three surfaces	339	D2530	Inlay - metallic - three surfaces	339	D6543	Onlay - metallic, three surfaces	426	D2542	Onlay - metallic - two surfaces	352	D6545	Retainer - cast metal for a resin bonded fixed	358	D2543	Onlay - metallic - three surfaces	426	D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	293	D2610	Inlay - porcelain/ceramic - one surface	289	D6600	Inlay - porcelain/ceramic, two surfaces	356	D2620	Inlay - porcelain/ceramic - two surfaces	313	D6601	Inlay - porcelain/ceramic, three surfaces	399	D2630	Inlay - porcelain/ceramic - three surfaces	333	D6602	Inlay - cast high noble metal, two surfaces	382	D2642	Onlay - porcelain/ceramic - two surfaces	347	D6603	Inlay - cast high noble metal, three surfaces	415																																																																																																																																																																																	
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Plan 505xs

ADA CODE	BENEFIT	MEMBER COPAYMENT (\$)	ADA CODE	BENEFIT	MEMBER COPAYMENT (\$)
D6614	Onlay - cast noble metal, two surfaces	\$395	D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth and/or alveolus	\$91/157
D6720/21/22	Abutment crown - resin w/ metal	392	D7280	Surgical access of an unerupted tooth	82/125
D6740	Crown - porcelain/ceramic	373	D7281	Surgical exposure of impacted or unerupted tooth to aid eruption	95/149
D6750/51/52	Abutment crown - porcelain to metal	392	D7291	Transeptal fiberotomy/supra crestal fiberotomy, by report	31/80
D6780	Crown - 3/4 cast high noble metal	381	D7310/20	Alveoplasty per quadrant	100/130
D6781	Crown - 3/4 cast predominantly base metal	357	D7510	Incision/draining of abscess, soft tissue	67/90
D6782	Crown - 3/4 cast noble metal	365	D7960	Frenulectomy (Frenectomy or Frenotomy)	190/200
D6783	Crown - 3/4 porcelain/ceramic	372			
D6790/91/92	Abutment crown - full cast metal	381			
D6930	Receement fixed partial bridge	52			
D6970/71	Cast post & core	142			
D6972	Prefabricated post & core - in addition to bridge retainer	116			
D6973	Core build up for retainer, including any pins	94			
D6975	Coping - metal	236			
D6976	Each additional cast post - same tooth	94			
D6977	Each additional prefabricated post - same tooth	43			
D6980	Fixed partial denture repair, by report	124			
ENDODONTICS¹					
D3220	Therapeutic pulpotomy (excl. final rest)	58/82	D8660	Records and models	350
D3221	Pulpal debridement, primary and perm. teeth	62/75	D8070	Comprehensive Orthodontic Treatment of the transitional dentition	2,800
D3310	Anterior (excl. final rest)	235/396	D8080	Comprehensive Orthodontic Treatment of Adolescent Dentition	2,900
D3320	Bicuspid (excl. final rest)	286/460	D8090	Comprehensive Orthodontic Treatment of Adult Dentition	3,100
D3330	Molar (excl. final rest)	353/540	D8670	Periodic Orthodontic Visit (beyond 24 months of treatment) per month charge	100
D3333	Internal root repair of perforation defects	69/95	D8680	Orthodontic Retention (removal of appliances, construction and placement of retainer(s))	350
D3346	Re-treatment - anterior, by report	258/350			
D3347	Re-treatment - bicuspid, by report	302/375			
D3348	Re-treatment - molar, by report	381/400			
D3410	Apicoectomy/Periradicular surg., ant	224/250			
D3421	Apicoectomy - bicuspid (first root)	241/320			
D3425	Apicoectomy - molar (first root)	274/320			
D3426	Apicoectomy - (each additional root)	106/125			
D3430	Retrograde filling - per root	82/105			
D3450	Root amputation - per root	146/156			
D3920	Hemisection (including any root removal)	146/175			
D3950	Canal prep/fit of preformed dowel or post	60/90			
PERIODONTICS¹					
D0180	Comprehensive Periodontal Evaluation - new or established patient - not in conjunction with D0150, limited to once per 18 months	30			
D4210	Gingivectomy - four or more teeth per quad	202/294			
D4211	Gingivectomy one to three teeth per quad	72/144			
D4220	Gingival curettage, surgical - per quadrant, by report	103/182			
D4240	Gingival flap procedure, including root planing, per quad	246/360			
D4241	Gingival flap procedure, including root planing - one to three teeth, per quadrant	200/300			
D4260	Osseous (bone) surgery - four or more per quad	370/650			
D4261	Osseous (bone) surgery - one - three teeth per quad	274/315			
D4268	Surgical revision procedure, per tooth	251/300			
D4274	Distal or proximal wedge procedure	235/325			
D4341	Perio scaling & root planing four or more per quad	90/200			
D4342	Perio scaling & root planing one - three teeth per quad	43/130			
D4355	Full mouth debridement	58/160			
D4381	Localized delivery of chemotherapeutic agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report	55/68			
D4910	Periodontal maintenance procedures	56/110			
D9940	Occlusal guards, by report	245/225			
D9950	Occlusion analysis - mounted case	66			
D9951	Occlusal adjustment, limited	50/61			
D9952	Occlusal adjustment, complete	211/220			
ORAL SURGERY¹					
D7110	Single tooth	52/69			
D7111	Coronal remnants - deciduous tooth	34/50			
D7130	Root removal - exposed roots	67			
D7140	Extraction - erupted tooth or exposed root	48/68			
D7210	Surgical extraction - erupted	94/105			
D7220	Removal of impacted tooth - soft tissue	106/114			
D7230	Removal of impacted tooth - partially bony	140/195			
D7240	Removal of impacted tooth - completely bony	169/265			
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	134/295			
D7250	Removal of residual tooth roots	98/101			

¹ Specialty care is provided at the listed copayment whether performed by a participating general dentist or a participating specialist. Referrals to a specialist must be made by the member's participating general dentist. If the listed procedure contains a slash (/), the second listed fee represents the copayment due to the specialist after referral.

ORTHODONTICS

D8660	Records and models	350
D8070	Comprehensive Orthodontic Treatment of the transitional dentition	2,800
D8080	Comprehensive Orthodontic Treatment of Adolescent Dentition	2,900
D8090	Comprehensive Orthodontic Treatment of Adult Dentition	3,100
D8670	Periodic Orthodontic Visit (beyond 24 months of treatment) per month charge	100
D8680	Orthodontic Retention (removal of appliances, construction and placement of retainer(s))	350

Phase I Treatment (D8010 - D8050) is provided at a 20% reduction from the orthodontist's UCR fees.

Plan Exclusions

- Services for injuries or conditions which are covered under worker's compensation and employer's liability laws. Services which are provided without cost to Subscribers by any federal, state, municipal, county, or other subdivision's program (with the exception of Medicaid).
- Services which, in the opinion of the attending dentist, are not necessary for the patient's dental health.
- Cosmetic, elective or aesthetic dentistry.
- Oral surgery requiring the setting of fractures or dislocations.
- Services with respect to malignancies, cysts or neoplasms, hereditary, congenital, anodontic, mandibular prognathism or development malformations where, in the sole discretion of the Participating Dentist, such services should not be performed in a dental office.
- Dispensing of drugs.
- Hospitalization for any dental procedure.
- Treatment required for conditions resulting from major disaster, epidemic or war, including declared or undeclared war or acts of war.
- Replacement due to loss or theft of prosthetic appliance.
- General anesthesia and sedation.
- Services that cannot be performed because of the general health of the patient.
- Implantation and related restorative procedures.
- Unlisted procedures are not covered.
- Services obtained outside of the dental office in which enrolled and which are not pre-authorized by such office or Dominion Dental Services, Inc. (with the exception of out-of-area emergency dental services).
- Services related to the treatment of TMD (Temporal Mandibular Disorder).
- Services performed by a Plan Specialist without a referral from a Participating General Dentist (with the exception of Orthodontics).
- Elective surgery including, but not limited to extraction of non-pathologic, asymptomatic impacted teeth.

Plan Limitations

- Replacement of a bridge, crown or denture within 5 years after the date it was originally installed.
- Replacement of filling within 2 years after original date of placement.
- Teeth cleaning (Prophylaxis) at intervals of less than six months.
- Crown and bridge fees apply to treatment involving five or fewer units when presented in a single treatment plan. Additional crown or bridge units, beginning with the sixth unit, are available at the provider's Usual, Customary, and Reasonable (UCR) fee, minus 25%.
- Full mouth x-rays or panoramic film – one set every three years.
- Retreatment of root canal within 2 years of the original treatment.
- Pedodontic care is covered up to age 5 with a referral from a Participating General Dentist.

Only ADA CDT 4 codes are considered valid by Dominion Dental Services, Inc. CDT 4 © 2002 American Dental Association.